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CONFIRMATION NO. 4690

SERIAL NUMBER 10/823,012	FILING DATE 04/13/2004 RULE	CLASS 548	GROUP ART UNIT 1626	ATTORNEY DOCKET NO. R0130D-CON
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/421,119 04/22/2003 PAT 6,756,395
 which claims benefit of 60/374,700 04/23/2002 *
 and claims benefit of 60/378,775 05/08/2002
 (*)Data provided by applicant is not consistent with PTO records.

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/23/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	Met after Allowance			
Verified and Acknowledged		Examiner's Signature	Initials	15	1

ADDRESS

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TITLE

Imidazolinylmethyl aralkylsulfonamides

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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